



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER*

18 MPD 0222

CRASH SEVERITY
 1 - FATAL
 2 - INJURY
 3 - PDO

HIT/SKIP
 1 - SOLVED
 2 - UNSOLVED

LOCAL INFORMATION
 18MPD0222

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	<input type="checkbox"/> PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	<input checked="" type="checkbox"/> PRIVATE PROPERTY	REPORTING AGENCY NCIC* 03801	REPORTING AGENCY NAME* Millersburg Police Department	NUMBER OF UNITS 1	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN
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COUNTY* Holmes	<input type="checkbox"/> CITY* <input checked="" type="checkbox"/> VILLAGE* <input type="checkbox"/> TOWNSHIP*	CITY, VILLAGE, TOWNSHIP* Millersburg	CRASH DATE* 02/09/2018	TIME OF CRASH 1445	DAY OF WEEK Fri
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DEGREES/MINUTES/SECONDS LATITUDE 40:32:44.20	LONGITUDE 81:55:00.70	OR	DECIMAL DEGREES LATITUDE	LONGITUDE
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ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	DIVIDED LANE DIRECTION OF TRAVEL <input type="checkbox"/> N - NORTHBOUND <input type="checkbox"/> S - SOUTHBOUND <input type="checkbox"/> E - EASTBOUND <input type="checkbox"/> W - WESTBOUND	NUMBER OF THRU LANES 2	ROAD TYPES OR MILEPOST AL - ALLEY CR - CIRCLE HE - HEIGHTS MP - MILEPOST PL - PLACE ST - STREET WA - WAY AV - AVENUE CT - COURT HW - HIGHWAY PK - PARKWAY RD - ROAD TE - TERRACE BL - BLVD DR - DRIVE LA - LANE PI - PIKE SO - SQUARE TL - TRAIL
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LOCATION ROUTE NUMBER Type	LOC PREFIX N, S, E, W	LOCATION ROAD NAME Private Property	LOCATION ROAD TYPE ST	ROUTE TYPES IR - INTERSTATE ROUTE (NO TURNERS) US - US ROUTE CR - NUMBERED COUNTY ROUTE SR - STATE ROUTE TR - NUMBERED TOWNSHIP ROUTE
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DISTANCE FROM REFERENCE <input type="checkbox"/> MILES <input type="checkbox"/> FEET <input type="checkbox"/> YARDS	DIR FROM REF N, S, E, W	REFERENCE ROUTE TYPE	REFERENCE ROUTE NUMBER	REF PREFIX N, S, E, W	REFERENCE NAME (ROAD, MILEPOST, HOUSE #) 759 S Washington St	REFERENCE ROAD TYPE
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REFERENCE POINT USED 1 - INTERSECTION 2 - MILE POST 3 - HOUSE NUMBER	CRASH LOCATION 01 - NOT AN INTERSECTION 02 - FOUR-WAY INTERSECTION 03 - T-INTERSECTION 04 - Y-INTERSECTION 05 - TRAFFIC CIRCLE/ROUNDBOUT	06 - FIVE-POINT, OR MORE 07 - ON RAMP 08 - OFF RAMP 09 - CROSSOVER 10 - DRIVEWAY ALLEY ACCESS	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 99 - UNKNOWN	<input type="checkbox"/> INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNKNOWN
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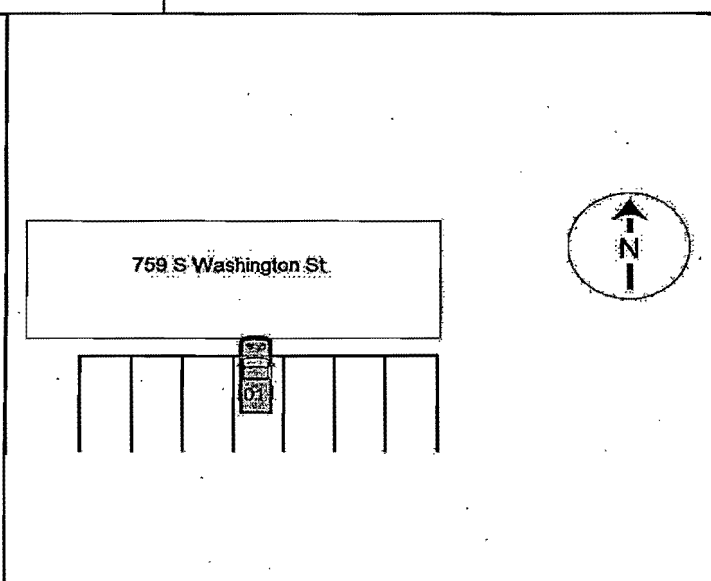
ROAD CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - UNKNOWN	ROAD CONDITIONS PRIMARY 02	SECONDARY	01 - DRY 02 - WET 03 - SNOW 04 - ICE 05 - SAND, MUD, DIRT, OIL, GRAVEL 06 - WATER (STANDING, MOVING) 07 - SLUSH 08 - DEBRIS*	09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT* 10 - OTHER 99 - UNKNOWN
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MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT	2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR	5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION	8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	WEATHER 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE	4 - RAIN 5 - SLEET, HAIL 6 - SNOW	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER/UNKNOWN
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ROAD SURFACE 1 - CONCRETE 2 - BLACKTOP BITUMINOUS ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER	LIGHT CONDITIONS PRIMARY 1	SECONDARY	1 - DAYLIGHT 2 - DAWN 3 - DUSK 4 - DARK - LIGHTED ROADWAY	5 - DARK - ROADWAY NOT LIGHTED 6 - DARK - UNKNOWN ROADWAY LIGHTING 7 - GLARE* 8 - OTHER	9 - UNKNOWN	<input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED
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<input type="checkbox"/> WORK ZONE RELATED	<input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VOLUNTEER) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	TYPE OF WORK ZONE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA
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NARRATIVE
 Unit 01 was eastbound in the parking lot of Dollar General. Unit 01 then turned northbound into a parking space over the concrete stop block and into the side of the store. Unit 01 stated he must have slid on ice. However, during my investigation, I was unable to locate any ice in the area.



REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)
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DATE CRASH REPORTED 02/09/2018	TIME CRASH REPORTED 1448	DISPATCH TIME 1449	ARRIVAL TIME 1451	TIME CLEARED 1517	OTHER INVESTIGATION TIME 20	TOTAL MINUTES 48
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OFFICER'S NAME Genet, Stephanie	OFFICER'S BADGE NUMBER 107	CHECKED BY
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UNIT

LOCAL REPORT NUMBER

18 MPD 0222

UNIT NUMBER 1	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) Weaver, Gary, E	OWNER PHONE NUMBER	DAMAGE SCALE 2	DAMAGE AREA FRONT RIGHT
OWNER ADDRESS: CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER) 33474 Tr 21, Millersburg, OH, 44654			1 - NONE	
LP STATE OH	LICENSE PLATE NUMBER FXL6417	VEHICLE IDENTIFICATION NUMBER 1GCCS136158147675	2 - MINOR	
VEHICLE YEAR 2005	VEHICLE MAKE Chevrolet	VEHICLE MODEL Colorado	3 - FUNCTIONAL	
PROOF OF INSURANCE SHOWN <input checked="" type="checkbox"/>	INSURANCE COMPANY Motorist Mutual	POLICY NUMBER 65080661654006A	4 - DISABLING	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP		TOWED BY	9 - UNKNOWN	
				CARRIER PHONE

US DOT	VEHICLE WEIGHT GWR/GCWR <input type="checkbox"/> 1 - LESS THAN OR EQUAL TO 10K LBS <input type="checkbox"/> 2 - 10,001 TO 26,000K LBS <input type="checkbox"/> 3 - MORE THAN 26,000K LBS	CARGO BODY TYPE 01 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAIN, CHIPS, GRAVEL 09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE REFUSE 99 - OTHER/UNKNOWN	TRAFFICWAY DESCRIPTION 1 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PARTED OR GRASS 4-FT.) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY <input type="checkbox"/> HIT / SKIP UNIT
HM PLACARD ID NO.	HAZARDOUS MATERIAL <input type="checkbox"/> RELATED		
HM CLASS NUMBER			

NON-MOTORIST LOCATION PRIOR TO IMPACT <input type="checkbox"/> 01 - INTERSECTION - MARKED CROSSWALK 02 - INTERSECTION - NO CROSSWALK 03 - INTERSECTION - OTHER 04 - MIDDLEBLOCK - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BI-CYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIAN/CROSSING ISLAND 10 - DRIVE WAY ACCESS 11 - SHARED-USE PATH/OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN	TYPE OF USE 1 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE 07 PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE MED HEAVY TRUCKS OR COMBO UNITS > 10K LBS BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 13 - SINGLE UNIT TRUCK OR VAN AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK; 3+ AXLES 15 - SINGLE UNIT TRUCK/ TRAILER 16 - TRUCK/TRACTOR (BOB/TAL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MED/HEAVY VEHICLE 21 - BUS/VAN (9-15 SEATS, INC DRIVER) 22 - BUS (16+ SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDALCYCLIST 26 - PEDESTRIAN/WALKER 27 - OTHER NON-MOTORIST <input type="checkbox"/> HAS HM PLACARD
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SPECIAL FUNCTION 01 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LBS) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER 09 - AMBULANCE 10 - FIRE 11 - HIGHWAY MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP.	17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)	MOST DAMAGED AREA 02 01 - NONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR 08 - LEFT SIDE 09 - LEFT FRONT 10 - TOP AND WINDOWS 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL (ALL AREAS) 14 - OTHER	ACTION 3 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
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PRE-CRASH ACTIONS 01 MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN 07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 18 - PUSHING VEHICLE 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING 21 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCE PRIMARY 17 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE PASSING/OFF ROAD 11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENT MANNER 15 - SWERING TO AVOID (DUE TO EXTERNAL CONDITIONS) 16 - WRONG SIDE/WRONG WAY 17 - FAILURE TO CONTROL 18 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE EQUIPMENT 20 - LOAD SHIFTING/FALLING/SPILLING 21 - OTHER IMPROPER ACTION NON-MOTORIST 22 - NONE 23 - IMPROPER CROSSING 24 - DARTING 25 - LYING AND/OR ILLEGALLY IN ROADWAY 26 - FAILURE TO YIELD RIGHT OF WAY 27 - NOT VISIBLE (DARK CLOTHING) 28 - INATTENTIVE 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER 30 - WRONG SIDE OF THE ROAD 31 - OTHER NON-MOTORIST ACTION	VEHICLE DEFECTS <input type="checkbox"/> 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORN OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - OTHER DEFECTS
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SEQUENCE OF EVENTS 1 51 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1 99 - UNKNOWN	NON-COLLISION EVENTS 01 - OVERTURN/ROLLOVER 02 - FIRE/EXPLOSION 03 - IMMERSION 04 - JACKKNIFE 05 - CARGO/EQUIPMENT LOSS OR SHIFT 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) 07 - SEPARATION OF UNITS 08 - RAN OFF ROAD RIGHT 09 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTER LINE 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION
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COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE (TRAIL ENGINE) 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT 25 - IMPACT ATTENUATOR/CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT

UNIT SPEED 15 <input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED	POSTED SPEED 25	TRAFFIC CONTROL 01 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	UNIT DIRECTION FROM 2 TO 1 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
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MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER
18 MPD 0222

UNIT NUMBER: 1 | NAME: LAST, FIRST, MIDDLE: Weaver, Gary, E | DATE OF BIRTH: 05/17/1939 | AGE: 78 | GENDER: M (F - FEMALE, M - MALE)

Address, City, State, Zip: 33474 Tr 21, Millersburg, OH, 44654 | CONTACT PHONE - INCLUDE AREA CODE:

MOTORIST/NON-MOTORIST

INJURES: 1 | INJURED TAKEN BY: 1 | EMS AGENCY: | MEDICAL FACILITY INJURED TAKEN TO: | SAFETY EQUIPMENT USED: 04 | DOT COMPLIANT MOTORCYCLE HELMET: | SEATING POSITION: 01 | AIR BAG USAGE: 1 | EJECTION: 1 | TRAPPED: 1

OL STATE: OH | OPERATOR LICENSE NUMBER: RR381832 | OL CLASS: 4 | No VALID DL: | M/C END: | CONDITION: 1 | ALCOHOL/DRUG SUSPECTED: 1 | ALCOHOL TEST STATUS: 1 | ALCOHOL TEST TYPE: 1 | ALCOHOL TEST VALUE: | DRUG TEST STATUS: 1 | DRUG TEST TYPE: 1

OFFENSE CHARGED (LOCAL CODE): | OFFENSE DESCRIPTION: | CITATION NUMBER: | HANDS-FREE DEVICE USED: | DRIVER DISTRACTED BY: 1

MOTORIST/NON-MOTORIST

INJURES: | INJURED TAKEN BY: | EMS AGENCY: | MEDICAL FACILITY INJURED TAKEN TO: | SAFETY EQUIPMENT USED: | DOT COMPLIANT MOTORCYCLE HELMET: | SEATING POSITION: | AIR BAG USAGE: | EJECTION: | TRAPPED: |

OL STATE: | OPERATOR LICENSE NUMBER: | OL CLASS: | No VALID DL: | M/C END: | CONDITION: | ALCOHOL/DRUG SUSPECTED: | ALCOHOL TEST STATUS: | ALCOHOL TEST TYPE: | ALCOHOL TEST VALUE: | DRUG TEST STATUS: | DRUG TEST TYPE: |

OFFENSE CHARGED (LOCAL CODE): | OFFENSE DESCRIPTION: | CITATION NUMBER: | HANDS-FREE DEVICE USED: | DRIVER DISTRACTED BY: |

MOTORIST

INJURES: 1 - NO INJURY / NONE REPORTED, 2 - POSSIBLE, 3 - NON-FACIATATING, 4 - FACIATATING, 5 - FATAL

INJURED TAKEN BY: 1 - NOT TRANSPORTED / TREATED AT SCENE, 2 - EMS, 3 - POLICE, 4 - OTHER, 5 - UNKNOWN

SAFETY EQUIPMENT USED: 01 - NONE USED - VEHICLE OCCUPANT, 02 - SHOULDER BELT ONLY USED, 03 - LAP BELT ONLY USED, 04 - SHOULDER AND LAP BELT ONLY USED, 05 - CHILD RESTRAINT SYSTEM FORWARD FACING, 06 - CHILD RESTRAINT SYSTEM REAR FACING, 07 - BOOSTER SEAT, 08 - HELMET USED, 99 - UNKNOWN SAFETY EQUIPMENT

NON-MOTORIST: 09 - NONE USED, 10 - HELMET USED, 11 - PROTECTIVE PADS USED (HEAD, NECK, ETC.), 12 - REFLECTIVE CLOTHING, 13 - LIGHTING, 14 - OTHER

SEATING POSITION: 01 - FRONT - LEFT SIDE (DRIVER SEAT), 02 - FRONT - MIDDLE, 03 - FRONT - RIGHT SIDE, 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER), 05 - SECOND - MIDDLE, 06 - SECOND - RIGHT SIDE, 07 - THIRD - LEFT SIDE (MOTORCYCLE PASSENGER), 08 - THIRD - MIDDLE, 09 - THIRD - RIGHT SIDE, 10 - SLEEPER SECTIONS CAB (TRUCK), 11 - PASSENGER IN OTHER EXPOSED CARGO AREA (NON-MOTORIST SEATING AREA, NON-TRUCK CAB), 12 - PASSENGER IN UNEXPOSED CARGO AREA, 13 - TRAILING UNIT, 14 - REAR OF VEHICLE EXTERIOR (NON-TRUCK UNIT), 15 - NON-MOTORIST, 16 - OTHER, 99 - UNKNOWN

AIR BAG USAGE: 1 - NOT DEPLOYED, 2 - DEPLOYED FRONT, 3 - DEPLOYED SIDE, 4 - DEPLOYED BOTH FRONT/SIDE, 5 - NOT AVAILABLE, 6 - DEPLOYMENT UNKNOWN

EJECTION: 1 - NOT EJECTED, 2 - TOTALLY EJECTED, 3 - PARTIALLY EJECTED, 4 - NOT APPLICABLE

TRAPPED: 1 - NOT TRAPPED, 2 - EXTORTIONED BY MECHANICAL MEANS, 3 - EXTRICATED BY NON-MECHANICAL MEANS

OPERATOR LICENSE CLASS: 1 - CLASS A, 2 - CLASS B, 3 - CLASS C, 4 - REGULAR CLASS OVER 21, 5 - M/C/MOPED ONLY

CONDITION: 1 - APPARENTLY NORMAL, 2 - PHYSICAL IMPAIRMENT, 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED), 4 - ILLNESS

ALCOHOL/DRUG SUSPECTED: 1 - NONE, 2 - YES - ALCOHOL SUSPECTED, 3 - YES - HIB NOT INFORMED, 4 - YES - DRUGS SUSPECTED, 5 - YES - ALCOHOL AND DRUGS SUSPECTED

ALCOHOL TEST STATUS: 1 - NONE GIVEN, 2 - TEST REFUSED, 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSUAL, 4 - TEST GIVEN, RESULTS KNOWN, 5 - TEST GIVEN, RESULTS UNKNOWN

ALCOHOL TEST TYPE: 1 - NONE, 2 - BLOOD, 3 - URINE, 4 - BREATH, 5 - OTHER

DRUG TEST STATUS: 1 - NONE GIVEN, 2 - TEST REFUSED, 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSUAL, 4 - TEST GIVEN, RESULTS KNOWN, 5 - TEST GIVEN, RESULTS UNKNOWN

DRUG TEST TYPE: 1 - NONE, 2 - BLOOD, 3 - URINE, 4 - OTHER

DRIVER DISTRACTED BY: 1 - NO DISTRACTION REPORTED, 2 - PHONE, 3 - TEXTING/REPLYING, 4 - ELECTRONIC COMMUNICATION DEVICE, 5 - OTHER ELECTRONIC DEVICE (HANDHELD DEVICE, RADIO, DVD), 6 - OTHER INSIDE THE VEHICLE, 7 - EXTERNAL DISTRACTION

UNIT NUMBER: | NAME: LAST, FIRST, MIDDLE: | DATE OF BIRTH: | AGE: | GENDER: (F - FEMALE, M - MALE)

Address, City, State, Zip: | CONTACT PHONE - INCLUDE AREA CODE:

OCCUPANT

INJURES: | INJURED TAKEN BY: | EMS AGENCY: | MEDICAL FACILITY INJURED TAKEN TO: | SAFETY EQUIPMENT USED: | DOT COMPLIANT MOTORCYCLE HELMET: | SEATING POSITION: | AIR BAG USAGE: | EJECTION: | TRAPPED: |

UNIT NUMBER: | NAME: LAST, FIRST, MIDDLE: | DATE OF BIRTH: | AGE: | GENDER: (F - FEMALE, M - MALE)

Address, City, State, Zip: | CONTACT PHONE - INCLUDE AREA CODE:

OCCUPANT

INJURES: | INJURED TAKEN BY: | EMS AGENCY: | MEDICAL FACILITY INJURED TAKEN TO: | SAFETY EQUIPMENT USED: | DOT COMPLIANT MOTORCYCLE HELMET: | SEATING POSITION: | AIR BAG USAGE: | EJECTION: | TRAPPED: |